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Acting Director

County of Los Angeles DEPARTMENT OF CHILDREN AND FAMILY SERVICES

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June 10, 2011

To: Supervisor Michael D. Antonovich, Mayor
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From: Jackie Contreras, Ph.D.
Acting Director

FIVE ACRES GROUP HOME CONTRACT COMPLIANCE MONITORING REVIEW

In accordance with your Board's April 14, 2009 motion, we are informing your Board of the results of a group home compliance review.

Five Acres Group Home has sites located in Los Angeles County's 5th Supervisorial District and provides services to Los Angeles County Department of Children and Family Services' (DCFS) foster youth. According to the agency's program statement, its purpose is "to provide services to court dependent seriously emotionally disturbed children." Five Acres Group Home is licensed to serve a capacity of 76 children, ages 6 through 18.

The Out-of-Home Care Management Division (OHCMD) conducted a review of Five Acres Group Home in December 2010 at which time it had one six-bed site, one 70-bed site, and 74 DCFS placed children. The placed children's overall average length of placement was 13 months, and their average age was 12. For the purpose of this review, 15 placed children were interviewed and their case files were reviewed. Fifteen staff files were reviewed for compliance with Title 22 regulations and contract requirements.

Sixty-seven of the children were on psychotropic medication. We reviewed their case files to assess timeliness of psychotropic medication authorizations and to confirm that medication logs documented correct dosages were being administered as prescribed.

SCOPE OF REVIEW

The purpose of this review was to assess Five Acres Group Home's compliance with the contract and State regulations. The visit included a review of the agency's program statement, administrative internal policies and procedures, 15 children's case files, and

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a random sampling of personnel files. A visit was made to the sites to assess the quality of care and supervision provided to the children and we conducted interviews with children to assess the care and services they were receiving.

A copy of this report has been sent to the Auditor-Controller (A-C) and Community Care Licensing (CCL).

SUMMARY

Generally, Five Acres Group Home was providing good quality care to DCFS placed children and the services were provided as outlined in the agency's program statement. The children's case files and personnel files were well organized and professionally maintained. The sites were clean and adequately landscaped. All 15 children interviewed said they felt safe at the Group Home.

At the time of the review, the Group Home needed to develop comprehensive Needs and Services Plans (NSP). In addition, one child's dental examination was not timely.

The Executive Director, Administrator and staff were accessible, cooperative and willing to make the necessary corrections regarding the findings noted during the review.

NOTABLE FINDING

The following are the notable findings of our review:

- Six initial and 21 updated NSPs were comprehensive and met all the required elements in accordance with the NSP template. However, nine initial and eight updated NSPs were not comprehensive and did not meet all the required elements in accordance with the NSP template. Some initial and updated NSPs did not address the participation of family in the child's treatment and dates of school enrollment, and one did not explain why a child was not enrolled in school within three days. Also, one NSP did not address the Group Home contact with the CSW and did not provide information on the visitation plan. Some visitation dates were incorrect, and the Life Skills Section was incomplete. In addition, the identified treatment needs did not include a plan, method, or responsible party to accomplish the goals; the NSP did not report the child's progress in meeting his goals and did not explain why there was no parental involvement.
- One of the 15 children's dental examinations was not timely.

The detailed report of our findings is attached.

EXIT CONFERENCE

The following are highlights from the exit conference held January 6, 2011:

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In attendance:

Joe Ford, Director of Residential Treatment, Chinling Chen, Administrator, Donna LeCesne, Director of Milieu Services, Lillian Do, Residential Treatment Center Case Manager, Monique Am, Senior Unit Clinician, Jude Ann Catayong, Quality Assurance Analyst, and Melissa Spragg, Clinician Supervisor, Five Acres Group Home; and Edward Preer, Monitor, DCFS OHCMD.

Highlights:

The Director was in agreement with the findings and recommendations. During the exit conference, he stated that Five Acres planned to follow up with staff to ensure that they continued to improve their documentation on the NSPs and ensure they were comprehensive.

The Director stated the child with a late dental examination had a dental examination during the year prior to placement at Five Acres. However, the CSW and prior placement were not able to provide the dental documentation. To correct this issue, Five Acres will institute a policy to ensure that if the prior dental appointment information is not available within the first two weeks of admittance, they will schedule an appointment for the client within the first 30 days of admittance or as soon as the dentist is available.

As agreed, Five Acres Group Home provided a written Corrective Action Plan (CAP) addressing the recommendations noted in this compliance report. The CAP is attached.

As noted in the monitoring protocol, a follow up visit will be conducted to address the provider's approved CAP and assess for full implementation of recommendations.

If you have any questions, please call me or your staff may contact Aldo Marin, Board Relations Manager, at (213) 351-5530.

JC:RS:KR
EAH:DC:ep

Attachment

c: William T Fujioka, Chief Executive Officer
Wendy Watanabe, Auditor-Controller
Donald H. Blevins, Chief Probation Officer
Public Information Office
Audit Committee
Sybil Brand Commission
Joe Ford, Director of Residential Treatment, Five Acres Group Home
Jean Chen, Regional Manager, Community Care Licensing
Lenora Scott, Regional Manager, Community Care Licensing

FIVE ACRES CONTRACT COMPLIANCE MONITORING REVIEW SUMMARY

Residential Treatment Center
760 West Mountain View St.
Altadena, CA 91001
License Number: 191200236

Solita Group Home
1236 Solita Rd.
Pasadena, CA 91103
License Number: 191290123

Rate Classification Level: 12

	Contract Compliance Monitoring Review	Findings: December 2010
I	<u>Licensure/Contract Requirements</u> (9 Elements) <ol style="list-style-type: none"> 1. Timely Notification for Child's Relocation 2. Stabilization to Prevent Removal of Child 3. Transportation 4. SIRs 5. Compliance with Licensed Capacity 6. Disaster Drills Conducted 7. Disaster Drill Logs Maintenance 8. Runaway Procedures 9. Allowance Logs 	Full Compliance (ALL)
II	<u>Facility and Environment</u> (6 Elements) <ol style="list-style-type: none"> 1. Exterior Well Maintained 2. Common Areas Maintained 3. Children's Bedrooms/Interior Maintained 4. Sufficient Recreational Equipment 5. Sufficient Educational Resources 6. Adequate Perishable and Non Perishable Food 	Full Compliance (ALL)
III	<u>Program Services</u> (8 Elements) <ol style="list-style-type: none"> 1. Child Population Consistent with Program Statement 2. DCFS CSW Authorization to Implement NSPs 3. Children's Participation in the Development of NSPs 4. NSPs Implemented and Discussed with Staff 5. Therapeutic Services Received 6. Recommended Assessments/Evaluations Implemented 7. DCFS CSWs Monthly Contacts Documented 8. Comprehensive NSPs 	1. Full Compliance 2. Full Compliance 3. Full Compliance 4. Full Compliance 5. Full Compliance 6. Full Compliance 7. Full Compliance 8. Improvement Needed
IV	<u>Educational and Emancipation Services</u> (4 Elements) <ol style="list-style-type: none"> 1. Emancipation/Vocational Programs Provided 2. ILP Emancipation Planning 3. Current IEPs Maintained 4. Current Report Cards Maintained 	Full Compliance (ALL)

V	<u>Recreation and Activities</u> (3 Elements) <ol style="list-style-type: none"> 1. Participation in Recreational Activity Planning 2. Participation in Recreational Activities 3. Participation in Extra-Curricular, Enrichment and Social Activities 	Full Compliance (ALL)
VI	<u>Children's Health-Related Services (including Psychotropic Medications)</u> (9 Elements) <ol style="list-style-type: none"> 1. Current Court Authorization for Administration of Psychotropic Medication 2. Current Psychiatric Evaluation Review 3. Medication Logs 4. Initial Medical Exams Conducted 5. Initial Medical Exams Timely 6. Follow-up Medical Exams Timely 7. Initial Dental Exams 8. Initial Dental Exams Timely 9. Follow-Up Dental Exams Timely 	<ol style="list-style-type: none"> 1. Full Compliance 2. Full Compliance 3. Full Compliance 4. Full Compliance 5. Full Compliance 6. Full Compliance 7. Full Compliance 8. Improvement Needed 9. Full Compliance
VII	<u>Personal Rights</u> (11 Elements) <ol style="list-style-type: none"> 1. Children Informed of Group Home's Policies and Procedures 2. Children Feel Safe 3. Satisfaction with Meals and Snacks 4. Staff Treatment of Children with Respect and Dignity 5. Appropriate Rewards and Discipline System 6. Children Free to Receive or Reject Voluntary Medical, Dental and Psychiatric Care 7. Children Allowed Private Visits, Calls and Correspondence 8. Children Free to Attend Religious Services/Activities 9. Reasonable Chores 10. Children Informed about Psychotropic Medication 11. Children Aware of Right to Refuse Psychotropic Medication 	Full Compliance (ALL)
VIII	<u>Children's Clothing and Allowance</u> (8 Elements) <ol style="list-style-type: none"> 1. \$50 Clothing Allowance 2. Adequate Quantity of Clothing Inventory 3. Adequate Quality of Clothing Inventory 4. Involvement in Selection of Clothing 5. Provision of Personal Care Items 6. Minimum Monetary Allowances 7. Management of Allowance 8. Encouragement and Assistance with Life Book 	Full Compliance (ALL)

IX	<p><u>Personnel Records (including Staff Qualifications, Staffing Ratios, Criminal Clearances and Training)</u> (12 Elements)</p> <ol style="list-style-type: none"> 1. Education/Experience Requirement 2. Criminal Fingerprint Cards Timely Submitted 3. CACIs Timely Submitted 4. Signed Criminal Background Statement Timely 5. Employee Health Screening Timely 6. Valid Driver's License 7. Signed Copies of GH Policies and Procedures 8. Initial Training Documentation 9. CPR Training Documentation 10. First Aid Training Documentation 11. On-going Training Documentation 12. Emergency Intervention Training Documentation 	Full Compliance (ALL)
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**FIVE ACRES GROUP HOME
PROGRAM CONTRACT COMPLIANCE MONITORING REVIEW**

**Residential Treatment Center
760 West Mountain View St.
Altadena, CA 91001
License Number 191200236
Rate Classification Level 12**

**Solita Group Home
1236 Solita Rd.
Pasadena, CA 91103
License Number 19190123
Rate Classification Level 12**

The following report is based on a "point in time" monitoring visit and is only intended to report on the findings noted during the December 2010 monitoring review.

CONTRACTUAL COMPLIANCE

Based on our review of 15 children's files, 15 staff files and/or documentation from the provider, Five Acres Group Home was in full compliance with seven of nine sections of our Contract Compliance review: Licensure/Contract Requirements, Facility and Environment, Educational and Emancipation Services, Recreation and Activities, Personal Rights, Clothing and Allowance, and Personnel Records. The following report details the results of our review.

PROGRAM SERVICES

Based on our review of 15 children's files and/or documentation from the provider, Five Acres fully complied with seven of eight elements reviewed in the area of Program Services.

We noted that placed children met the Group Home's population criteria as outlined in the agency's program statement. Children were assessed for needed services within 30 days and received the required therapeutic services. Recommendations on required and/or recommended assessments/evaluations were implemented.

Based on our review, we found that the treatment team developed and implemented the Needs and Services Plans (NSP) with the participation of age-appropriate children and discussed the NSPs with the Group Home staff. However, nine initial and eight updated NSPs were not comprehensive and did not meet all the required elements in accordance with the NSP template. Some of the deficient initial and updated NSPs did not address participation of family in the child's treatment or dates of school enrollment and did not explain why a child was not enrolled in school within three days. One did not address the Group Home contact with the CSW, did not provide information on the visitation plan. NSP dates were incorrect, and the Life Skills Section was incomplete. The identified treatment needs did not include a plan, method, responsible party to accomplish the child's goals. One did not report the child's progress in meeting his goals and did not explain why there was no parental involvement.

Recommendation:

Five Acres Group Home Management shall ensure that:

1. it develops comprehensive NSPs.

CHILDREN'S HEALTH-RELATED-SERVICES, INCLUDING PSYCHOTROPIC MEDICATION

Based on our review of 15 children's files and/or documentation from the provider, Five Acres fully complied with eight of nine elements reviewed in the area of Children's Health-Related Services, Including Psychotropic Medication. Based on our review, we determined that the children had court-approved authorization for the administration of psychotropic medication. Each child had current psychiatric evaluations/reviews, and medication logs were properly maintained. Initial medical examinations were timely and the children received follow-up medical and dental examinations. However one child's initial dental examination was not timely.

Recommendation:

Five Acres Group Home Management shall ensure that:

2. initial dental examinations are timely.

PRIOR YEAR FOLLOW-UP FROM THE AUDITOR-CONTROLLER'S REPORT

Objective

Determine the status of the recommendations reported in the Auditor-Controller's (A-C) prior monitoring review.

Verification

We verified whether the outstanding recommendations from the A-C's March 3, 2009 report were implemented.

Results

The A-C's prior monitoring report contained five outstanding recommendations. Specifically, Five Acres Group Home was to ensure that children taking psychotropic medication had current court authorizations and routinely saw their prescribing physician. In addition, Five Acres needed to train their staff to treat the children with respect and dignity, inform the children of their right to refuse medication, and allow the children to receive unopened mail. Based on our follow-up of these recommendations, Five Acres Group Home fully implemented all of the recommendations.

Recommendation:

None



Dorothy Channel, Group Home Manager
Department of Children and Family Services
Out of Home Care Management Division
9320 Telstar Ave, Room # 216
El Monte, CA 91731

Regarding: CAP Contract **Compliance 2010**

IB Program Services 22A

Findings NSP's were not comprehensive
CORRECTIVE ACTION PLAN

- NSP are comprehensive
- School enrollment date is documented
- NSP updated dates are correct
- Details of child's visits with family are provided
- Quarterly report information is not listed on the initial NSP
- Treatment and visitation plan is documented
- Life skills section is complete
- Treatment needs provide a plan, method and person responsible for accomplishing the goals
- Education section is complete
- Explanation for no parental involvement
- NSP progress report on the child's physical, dental and psychological health reports the child's progress in meeting the goals.

Effective immediately, we have restructured our Clinical oversight, whereby there will be one central person (a Clinical Supervisor) responsible for reviewing all Needs and Services Plans. When reviewing Needs and Services Plans, the Clinical Supervisor will utilize a newly enhanced NSP audit tool.

In addition, the Clinical Supervisor will review the Needs and Services Plans to ensure that the NSP is developed within 30 days of the date of the initial placement and 90 days thereafter that has outcome based goals that are specific, measureable, attainable, and has a specific time frame for each deliverable.

Person and title responsible for implementing and monitoring the corrective action:
RTC: Joe Ford, Director of Residential Treatment Services; Melissa Spragg, Clinical Supervisor,
Group Homes; Chinling Chen, Group Home Program Supervisor.

Section IV Children's Health Related-Services, Including Psychotropic Medication; line 37
Timely Dental Appointments

Findings: One child's was indicated during our Facility Monitoring Review that one child's, dental appointment was late in being scheduled.



To correct this issue, Five Acres will institute a policy to ensure that if the prior dental appointment information is not available within the first two weeks of admittance, we will schedule an appointment for the client within the first thirty days of admittance or as soon as the dentist has an availability. The person responsible for monitoring this policy and procedure is our Health Services Supervisor, Frances Colella, P.A.-C

Sincerely,

Joe Ford
Joe Ford

Director of Residential Treatment
Five Acres

CC: Edward Preer, OHCMC